

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant : James T. Cash  
Serial No. : 09/849,785  
Filed : May 4, 2001  
For : SWITCHING VALVE SEAL  
Examiner : Not yet assigned  
Art Unit : Not yet assigned  
Attorney  
Docket No. : MT-123



Assistant Commissioner of Patents and Trademarks  
Washington, D.C. 20231

Sir:

INFORMATION DISCLOSURE STATEMENT

The Examiner is respectfully requested to consider the enclosed documents which are listed on the attached form PTO 1449.

Copies of the documents listed on the attached form are filed herewith.

I hereby certify that this correspondence is being deposited with the United States Postal Service as first class mail in an envelope addressed to: Commissioner of Patents and Trademarks, Washington D.C. 20231, on July 26, 2001

\_\_\_\_\_  
Signature: Kevin S. Lemack  
Date: July 26, 2001

Respectfully submitted,  
  
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|------------------------------------------|--|------------------------|------------------|
|                                          |  | Application Number     | 09/849,785       |
|                                          |  | Filing Date            | May 4, 2001      |
|                                          |  | First Named Inventor   | James T. Cash    |
|                                          |  | Group Art Unit         | Not yet assigned |
|                                          |  | Examiner Name          | Not yet assigned |
| Total Number of Pages in This Submission |  | Attorney Docket Number | MT-123           |

### ENCLOSURES (check all that apply)

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                           |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                            |
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| <input type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment / Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input checked="" type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/ Incomplete Application<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment Papers (for an Application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____ | <input type="checkbox"/> After Allowance Communication to Group<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input type="checkbox"/> Other Enclosure(s) (please identify below): |
| <div style="border: 1px solid black; padding: 5px; width: 100%;">Remarks</div>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                            |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                               |                                                                                                                                                                                                                                                                                                                                                                                                                            |

### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

|                         |                                                                                      |
|-------------------------|--------------------------------------------------------------------------------------|
| Firm or Individual name | Kevin S. Lemack<br>Nields & Lemack                                                   |
| Signature               |  |
| Date                    | July 26, 2001                                                                        |

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| Typed or printed name | Kevin S. Lemack                                                                      |
| Signature             |  |
| Date                  | July 26, 2001                                                                        |

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